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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Jennifer First name J. Middle name	First name Middle name	
	Bring your picture identification to your meeting with the trustee.	Kubek Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
2.	All other names you hav	ve		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7473		

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Case number (if known)

Debtor 1 Jennifer J. Kubek

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 487 Silver Charm Drive Oswego, IL 60543 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Kendall County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Jennifer J. Kubek

ar	Tell the Court About	Your Ba	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Ch	apter 7					
		☐ Ch	apter 11					
			apter 12					
			apter 13					
I will pay the entire fee when I file my petition. Please check about how you may pay. Typically, if you are paying the fee you order. If your attorney is submitting your payment on your behal a pre-printed address.					fee yourself, you may pay wi	th cash, cashier's check, or money		
					stallments. If you choose th	is option, sign and attach the	Application for Individuals to Pay	
			but is not req applies to you	uired to, waive ur family size a	e your fee, and may do so or and you are unable to pay th	lly if your income is less than e fee in installments). If you cl	or Chapter 7. By law, a judge may, 150% of the official poverty line that hoose this option, you must fill out	
		,	the <i>Applicatio</i>	on to Have the	Chapter 7 Filing Fee Waive	d (Official Form 103B) and file	e it with your petition.	
 Have you filed for bankruptcy within the No.								
	last 8 years?	☐ Yes	S.					
			District		When	Case nu	ımber	
			District		When	Case nu	ımber	
			District		When	Case nu	imber	
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	_	_					
	not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.					
			Debtor			Relations	hip to you	
			District		When	Case num	nber, if known	
			Debtor			Relations	hip to you	
			District		When	Case num	nber, if known	
11.	Do you rent your residence?	■ No.	Go to I	ine 12.				
		☐ Yes	s. Has yo	ur landlord ob	tained an eviction judgment	against you and do you want	to stay in your residence?	
				No. Go to line	e 12.			
				Yes. Fill out I bankruptcy p		riction Judgment Against You	(Form 101A) and file it with this	

Deb	otor 1	Jennifer J. Kubek		D00 1	Document	Page 4 of 55 Case number (if known)	
Par	t 3:	Report About Any Bu	ısinesses '	You Own as	a Sole Proprietor		
12.	of an	ou a sole proprietor y full- or part-time ness?	■ No.	Go to Pa	rt 4.		
			☐ Yes.	Name an	d location of business		
	busin an ind sepai	e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation.		Name of	business, if any		-

partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

Bankruptcy Code and are you a *small business* debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

13. Are you filing under

Chapter 11 of the

■ No.
I am not filing under Chapter 11.

Number, Street, City, State & ZIP Code

None of the above

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

	No.
_	

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Jennifer J. Kubek

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 55 Case number (if known) Debtor 1 Jennifer J. Kubek Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jennifer J. Kubek Signature of Debtor 2 Jennifer J. Kubek Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on April 20, 2016

MM / DD / YYYY

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Debtor 1 Jennifer J. Kubek

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Peter N. Metrou	Date	April 20, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Peter N. Metrou		
Printed name		
Metrou & Associates, P.C.		
Firm name		
123 W. Washington St., Suite 216		
Oswego, IL 60543		
Number, Street, City, State & ZIP Code		
Contact phone (630) 551-7171	Email address	metrouassociates@sbcglobal.net
06229853		
Bar number & State		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	essets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	264,020.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	64,209.08
	1c. Copy line 63, Total of all property on Schedule A/B	\$	328,229.08
Pa	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	314,667.84
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	10,835.78
	Your total liabilities	\$	325,503.62
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,368.97
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,359.50
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,917.50

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	343.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	343.00

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Fill	in this inforr	mation to identify	your case and t					
Deb	tor 1	Jennifer J. K	ubek					
		First Name		le Name	Last Name			
	tor 2 use, if filing)	First Name	Midd	le Name	Last Name			
Unit	ed States Ba	inkruptcy Court for	the: NORTHER	RN DISTRICT OF ILL	INOIS			
			· · · · · · · · · · · · · · · · · · ·				_	_
Cas	e number _				_			Check if this is an amended filing
SC n ea hink nfor	chedul ch category, s it fits best. B mation. If more	e as complete and a e space is needed, a	coperty escribe items. List	le. If two married peop	an asset fits in more than one le are filing together, both are e ne top of any additional pages,	equally responsible	for supp	olying correct
เทรพ	er every ques	stion.						
Part	1: Describe	Each Residence, Bu	uilding, Land, or O	ther Real Estate You O	wn or Have an Interest In			
	No. Go to Par	, , ,			g, land, or similar property?			
1.1	796 Apolle			What is the proper	ty? Check all that apply home			ns or exemptions. Put
	Street address,	if available, or other desc	cription		ulti-unit building n or cooperative			claims on Schedule D: Secured by Property.
	Oswego	IL	60543-0000	☐ Manufactured ☐ Land	d or mobile home	Current value of the entire property?		Current value of the portion you own?
	City	State	ZIP Code	Investment p	roperty	\$264,020	.00	\$264,020.00
				☐ Timeshare ☐ Other ☐ Who has an interes ☐ Debtor 1 only	st in the property? Check one		le, tenan	r ownership interest cy by the entireties, or
	Kendall			Debtor 2 only		- Communication		
	County			Debtor 1 and	Debtor 2 only of the debtors and another	Check if this (see instructions		unity property
				Other information y property identificat	you wish to add about this item ion number:	, such as local		
					-spouse Theodore Kube at sheriff sale but confire		still per	nding
2.	Add the doll	ar value of the no	rtion you own fo	or all of your entries	from Part 1, including any	entries for		\$20.4.000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here.....=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$264,020.00

Debt	tor 1 Jennifer J. Kubek	Document Page 11 of 55	se number (if known)	
3. C a	ars, vans, trucks, tractors, sport utili	ty vehicles, motorcycles	-	
	No			
	Yes			
3.1	Make: Acura	Who has an interest in the property? Check one		red claims or exemptions. Put ecured claims on <i>Schedule D:</i>
	Model: MDX	Debtor 1 only	Creditors Who Have	e Claims Secured by Property.
	Year: 2004	Debtor 2 only	Current value of th	
	Approximate mileage: 131,22 Other information:	<u> </u>	entire property?	portion you own?
	Location: 487 Silver Charm	At least one of the debtors and another		
	Drive, Oswego IL 60543	Check if this is community property (see instructions)	\$3,978.	93,978.00
5 A .p.	ages you have attached for Part 2. Was Describe Your Personal and Househ	u own for all of your entries from Part 2, including any rite that number here old Items le interest in any of the following items?		\$3,978.00 Current value of the portion you own? Do not deduct secured
E	cusehold goods and furnishings examples: Major appliances, furniture, li l No l Yes. Describe Miscellaneo	nens, china, kitchenware ous household goods and furnishings and elect	ronics	
		87 Silver Charm Drive, Oswego IL 60543		\$3,500.00
E	ectronics ixamples: Televisions and radios; audio including cell phones, camer No I Yes. Describe	, video, stereo, and digital equipment; computers, printer as, media players, games	s, scanners; music co	llections; electronic devices
E	collectibles of value fixamples: Antiques and figurines; painti other collections, memorabili No Yes. Describe	ngs, prints, or other artwork; books, pictures, or other art a, collectibles	objects; stamp, coin, o	or baseball card collections;
E	quipment for sports and hobbies ixamples: Sports, photographic, exercis musical instruments No 1 Yes. Describe	e, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes a	nd kayaks; carpentry tools;
10. F	Firearms Examples: Pistols, rifles, shotguns, am No Yes. Describe	munition, and related equipment		

Do	btor 1	Case 16-1		Doc 1	Filed 04/20/16 Document	Entered 04, Page 12 of 5	/20/16 12:39:33 55 Case number (if known)	Desc Main
	btor 1	Jennifer J. K	ирек				Case number (if known)	
	□ No [′]		thes, furs,	leather coats	s, designer wear, shoes	, accessories		
					cessary wearing ap er Charm Drive, Os			\$1,000.00
	■ No		velry, cost	ume jewelry,	engagement rings, wed	ding rings, heirloom	jewelry, watches, gems, g	old, silver
	Exam _l ■ No	orm animals oles: Dogs, cats, b Describe	oirds, horse	es				
	■ No	ther personal and		-	u did not already list, i	ncluding any healtl	h aids you did not list	
15					om Part 3, including a		s you have attached	\$4,500.00
Pai	rt 4: De	scribe Your Financ	ial Assets					
				uitable intere	est in any of the follow	ving?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No				our home, in a safe dep	osit box, and on han	d when you file your petitio	on
	Exam _l				al accounts; certificates counts with the same ins		credit unions, brokerage h	ouses, and other similar
	□ No ■ Yes				Institution	name:		
			17.1.	Checking	(balance attorney'			\$2,500.00
			17.2.	Savings	Savings in xxxx90		ase account ending	\$231.08
		s, mutual funds, o oles: Bond funds,			cks ith brokerage firms, mo	ney market accounts	,	
	_		Ir	stitution or is	ssuer name:			
19.		ublicly traded sto venture	ock and in	terests in in	ncorporated and uninc	orporated business	ses, including an interes	t in an LLC, partnership, and
	_	Give specific info		oout them e of entity:			% of ownership:	

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Case number (if known) Document Debtor 1 Jennifer J. Kubek 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: \$50.000.00 401(k) 401(k) with TransAmerica 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No $\hfill \square$ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes, Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No

Case 16-13433

Doc 1

Filed 04/20/16

Entered 04/20/16 12:39:33

Desc Main

	Case 16-134	33 Doc 1		Entered 04/20/16 12:39:3	3 Desc Main
Debtor 1	Jennifer J. Kube	k	Document	Page 14 01 55 Case number (if kno	wn)
☐ Yes.	Give specific informat	tion			
Debtor 1 Jennifer J. Kubek Document Page 14 of 55 Case number (if known)	urance				
			policy and list its value.	Beneficiary:	Surrender or refund value:
				ages 11 and 8 (debtor's	\$0.00
	-	Whole life poli	cy with United Life	ages 11 and 8 (debtor's	\$3,000.00
				ie) ages 11 and 8 (debtor's	\$0.00
somed No No Yes. 33. Claims Examp No Yes. 34. Other No Yes. 35. Any fir	Give specific informates against third parties ples: Accidents, employ Describe each claim contingent and unliqued Describe each claim anancial assets you die	tion s, whether or not yment disputes, ir uidated claims of d not already list	you have filed a lawsunsurance claims, or rights	it or made a demand for payment to sue	
		•	•		\$55,731.08
37. Do you	own or have any legal o			•	
Debtor 1 Jennifer J. Kubek Document Page 14 of 55 Case number of Minorani Yes. Give specific information.					
■ No.	Go to Part 7.	gal or equitable ii	nterest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property	You Own or Have	an Interest in That You Did	l Not List Above	

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known)

_	Do you have other property of any kind you did not already Examples: Season tickets, country club membership No Yes. Give specific information	list?			
54.	Add the dollar value of all of your entries from Part 7. Write	e tha	t number here		\$0.00
Part	8: List the Totals of Each Part of this Form			_	
55.	Part 1: Total real estate, line 2				\$264,020.00
56.	Part 2: Total vehicles, line 5		\$3,978.00		
57.	Part 3: Total personal and household items, line 15		\$4,500.00		
58.	Part 4: Total financial assets, line 36		\$55,731.08		
59.	Part 5: Total business-related property, line 45	-	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	-	\$64,209.08	Copy personal property to	tal \$64,209.0
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$328,229.08

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	rmation to identify your	case:		
Debtor 1	Jennifer J. Kubel	<		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				Charle Mhia ia an
(II KHOWH)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exem	ptions are	you claiming?	Check one only	, even if	your spouse is	filing with	vou.
----	-------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption Schedule A/B		eck only one box for each exemption.		
	796 Apollo Lane Oswego, IL 60543 Kendall County	\$264,020.00		\$15,000.00	735 ILCS 5/12-901	
	Owned with ex-spouse Theodore Kubek Property sold at sheriff sale but confirmation of sale still pending Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	2004 Acura MDX 131,224 miles Location: 487 Silver Charm Drive,	\$3,978.00		\$2,400.00	735 ILCS 5/12-1001(c)	
	Oswego IL 60543 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	Miscellaneous household goods and furnishings and electronics	\$3,500.00		\$1,268.92	735 ILCS 5/12-1001(b)	
	Location: 487 Silver Charm Drive, Oswego IL 60543 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Chase account ending in xxxxxxx5817 (balance is estimated	\$2,500.00		\$2,500.00	735 ILCS 5/12-1001(b)	
	after subtracting attorney's fees and costs associated with this bankruptcy and paid to Metrou & Associates, P.C.)			100% of fair market value, up to any applicable statutory limit		

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Case number (if known)

	- Common of Hubor					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim	Specific laws that allow exemption	
	Savings: Savings account with Chase account ending in xxxx9021	\$231.08	\$231.08		735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	401(k): 401(k) with TransAmerica Line from Schedule A/B: 21.1	\$50,000.00			735 ILCS 5/12-1006	
	Line from Scriedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit		
	Term life insurance through	\$0.00			215 ILCS 5/238	
	employer (no cash value) Beneficiary: two minor dependents ages 11 and 8 (debtor's children) Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit		
	Whole life policy with United Life	\$3,000.00			215 ILCS 5/238	
	Beneficiary: two minor dependents ages 11 and 8 (debtor's children) Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit		
	Term Life Insurance Policy with Northwestern Mutual (no cash value)	\$0.00			215 ILCS 5/238	
	Beneficiary: two minor dependents ages 11 and 8 (debtor's children) Line from Schedule A/B: 31.3			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)	
	■ No					
	☐ Yes. Did you acquire the property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

		Document P	age 18 of 55		_	
Fill in this informati	on to identify yοι	ur case:				
Debtor 1	Jennifer J. Kub	ek				
	irst Name		ist Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name La	st Name			
United States Bankru	iptcy Court for the	: NORTHERN DISTRICT OF ILLING	DIS			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Case number						
(if known)					· —	if this is an
					amend	ed filing
Official Form 1	06D					
				_		
Schedule D:	Creditors	S Who Have Claims Se	cured by Pro	perty		12/15
s needed, copy the Ad		If two married people are filing together, k out, number the entries, and attach it to the				
number (if known).						
1. Do any creditors hav	•	,, , , ,				
	s box and submit t	his form to the court with your other sch	edules. You have nothi	ng else to r	eport on this form.	
Yes. Fill in all	of the information	below.				
Part 1: List All Se	ecured Claims					
2. List all secured clair	ms. If a creditor has a	more than one secured claim, list the creditor	c separately Column A	(Column B	Column C
for each claim. If more	than one creditor has	s a particular claim, list the other creditors in I	Part 2. As Amount of		/alue of collateral	Unsecured
much as possible, list th	e claims in alphabeti	ical order according to the creditor's name.	Do not ded value of co		hat supports this	portion If any
2.1 Us Bank		Describe the property that secures the		24.00	\$264,020.00	\$0.00
Creditor's Name		796 Apollo Lane Oswego, IL 60	543		•	
		Kendall County				
		Owned with ex-spouse Theodo	re			
		Kubek				
Attention: Ba	nkruptcy	Property sold at sheriff sale bu				
Dept.		As of the date you file, the claim is: Chec				
Po Box 5229	LL 45204	apply.	T dil tidi			
Cincinnati, O		Contingent				
Number, Street, City	, State & Zip Code	☐ Unliquidated				
Who owes the debt?	Chack and	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	Check one.	_				
Debtor 2 only		 An agreement you made (such as mort car loan) 	gage or secured			
Debtor 1 and Debtor	2 only	Statutory lien (such as tax lien, mechar	iele lien)			
_		☐ Judgment lien from a lawsuit	ics lien)			
At least one of the de			acual Mautucus			
☐ Check if this claim community debt	relates to a	Other (including a right to offset)	cond Mortgage			
	Opened					
	1/01/08					
Data dalita ina	Last Active	Look A digita of account mount on	7978			
Date debt was incurred	d 10/01/14	Last 4 digits of account number				
0.0 U.O.DI-		5		40.04	\$004.000.00	***
2.2 US Bank Creditor's Name		Describe the property that secures the c		43.84	\$264,020.00	\$0.00
Creditor's Name		796 Apollo Lane Oswego, IL 60 Kendall County	543			
		Owned with ex-spouse Theodo	re			
		Kubek				
		Property sold at sheriff sale bu	t			
		confirmation of sale still pendi				
4801 Frederic	ca Street	As of the date you file, the claim is: Checapply.	k all that			
Owensboro,	KY 42301	☐ Contingent				
Number, Street, City	, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one	Nature of lien. Check all that apply				

Official Form 106D

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Debto	or 1 Jennifer J. Kubel	(Case number (if know)
	First Name	Middle Name	Last Name	
☐ De	btor 1 only btor 2 only btor 1 and Debtor 2 only least one of the debtors and a	car loan) ☐ Statutory lien	nt you made (such as morton) (such as tax lien, mechan) from a lawsuit	, 0
☐ Ch	eck if this claim relates to a emmunity debt	_	ing a right to offset) Fire	st Mortgage
Date o	lebt was incurred	Last 4 di	gits of account number	8960
Part 2 Use th trying than of	to collect from you for a de	tified for a Debt That Y ners to be notified about y but you owe to someone e ebts that you listed in Par	otals from all pages. Ou Already Listed your bankruptcy for a dek	st that you already listed in Part 1. For example, if a collection agency is rt 1, and then list the collection agency here. Similarly, if you have more ditors here. If you do not have additional persons to be notified for any
	Name, Number, Street, City, Codilis & Assocs 15W030 North Fronta Willowbrook, IL 6052	State & Zip Code		On which line in Part 1 did you enter the creditor?
	Name, Number, Street, City, Codilis & Assocs 15W030 North Fronta Willowbrook, IL 6052	age Rd, Ste 100		On which line in Part 1 did you enter the creditor?

			Document	Page 2	0 of 55		
Fill in	this inform	ation to identify your ca	ise:				
Debtor	r 1	Jennifer J. Kubek					
		First Name	Middle Name	Last Name			
Debtor							
(Spouse	if, filing)	First Name	Middle Name	Last Name			
United	States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS			
_		-					
Case r (if knowr	number						Shook if this is an
(11 10 11)	'/					_	Check if this is an Imended filing
						· ·	inionaca niing
Offici	ial Form	106E/F					
		-	o Have Unsecure	d Claims			12/15
			Part 1 for creditors with PRIOF nat could result in a claim. Als				
chedu	le G: Execute	ory Contracts and Unexpire	ed Leases (Official Form 106G)	. Do not include	any creditors with partially see	cured claims	that are listed in
			ed by Property. If more space If you have no information to				
		ber (if known).	•		·	•	
Part 1	List All	of Your PRIORITY Uns	ecured Claims				
1. Do	any creditor	rs have priority unsecured	claims against you?				
	No. Go to Pa	art 2.					
	Yes.						
Part 2	List All	of Your NONPRIORITY	Unsecured Claims				
3. Do	any creditor	rs have nonpriority unsecu	red claims against you?				
П	No. You have	e nothing to report in this par	t. Submit this form to the court w	ith your other sch	adulas		
_		e nothing to report in this par	t. Submit this form to the court w	itii your other sone	suules.		
	Yes.						
uns	secured claim	, list the creditor separately f	ms in the alphabetical order of or each claim. For each claim list	ted, identify what t	ype of claim it is. Do not list clair	ns already ind	cluded in Part 1. If more
	in one credito rt 2.	r holds a particular claim, list	the other creditors in Part 3.If yo	u have more than	three nonpriority unsecured clai	ms fill out the	Continuation Page of
							Total claim
4.1	Chase C	ard Services	Last 4 digits of a	ccount number	0386		\$0.00
		Creditor's Name		cccant namber	0300		Ψ0.00
	Attn: Co	rrespondence Dept			Opened 1/01/07 Last	Active	
	Po Box		When was the de	ebt incurred?	2/15/15		_
		ton, DE 19850 eet City State Zlp Code	As of the date ve	u filo the claim	is: Check all that apply		
		red the debt? Check one.	As of the date yo	ou life, the claim	s. Oneck all that apply		
	■ Debtor		☐ Contingent				
	_	•	_				
	☐ Debtor 2	•	☐ Unliquidated				
		1 and Debtor 2 only	☐ Disputed	ODITY	d alaim.		
		one of the debtors and anoth	_	ORITY unsecure	d claim:		
		f this claim is for a comm					
	debt Is the clain	n subject to offset?	☐ Obligations are report as priority of		ration agreement or divorce that	you did not	
	■ No				g plans, and other similar debts		
	■ No						
	⊔ Yes		Other. Specify	Credit Card	I		_

Document Page 21 of 55 Debtor 1 Jennifer J. Kubek Case number (if know) 4.2 \$1,205.30 **Chase Card Services** Last 4 digits of account number 9082 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 8/14/08 Last Active Po Box 15298 When was the debt incurred? 3/27/12 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Edward Health Ventures** Last 4 digits of account number 8725 \$24.03 Nonpriority Creditor's Name 26185 Network Place When was the debt incurred? Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify **Edward Health Ventures** \$221.94 4.4 8725 Last 4 digits of account number Nonpriority Creditor's Name 26185 Network Place When was the debt incurred? Chicago, IL 60673 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify Medical Debt

☐ Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Jennifer J. Kubek Case number (if know) 4.5 \$197.91 **Edward Health Ventures** Last 4 digits of account number Nonpriority Creditor's Name 26185 Network Place When was the debt incurred? 01/19/2016 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Medical Debt** ☐ Yes Other. Specify 4.6 **Edward Health Ventures** Last 4 digits of account number \$360.65 Nonpriority Creditor's Name 26185 Network Place When was the debt incurred? 01/19/2016 Chicago, IL 60673 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify 4.7 **Edward Hospital** 8106 \$536.06 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 140250 When was the debt incurred? **Toledo, OH 43614** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify

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Debtor 1 Jennifer J. Kubek Case number (if know) 4.8 \$103.31 **Edwards Hospital** Last 4 digits of account number 1029 Nonpriority Creditor's Name PO Box 4207 When was the debt incurred? 04-14-15 Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes 4.9 **Edwards Hospital** \$630.00 Last 4 digits of account number 9522 Nonpriority Creditor's Name PO Box 4207 When was the debt incurred? Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify 4.1 **Edwards Hospital** 8530 \$93.18 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 4207 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes

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Page 24 of 55 Case number (if know) Document Debtor 1 Jennifer J. Kubek

4.1 1	Fifth Third Bank	Last 4 digits of account number	5768	\$3,894.00
	Nonpriority Creditor's Name Attn: Bankruptcy 1850 East Paris Ave, Se	When was the debt incurred?	Opened 10/01/09 Last Active 12/28/15	
	Grand Rapds, MI 49546 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 2	Laboratory & Pathology Diagnostics	Last 4 digits of account number	4661	\$260.70
	Nonpriority Creditor's Name Dept. 4387 Carol Stream, IL 60122	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical De	<u>bt</u>	
l.1 }	Laboratory & Pathology Diagnostics	Last 4 digits of account number	5891	\$60.40
	Nonpriority Creditor's Name Dept. 4387	When was the debt incurred?		
	Carol Stream, IL 60122 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans	vertion agreement or diverse that you did not	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	□ Yes	■ Other. Specify Medical De	bt	

Entered 04/20/16 12:39:33 Case 16-13433 Doc 1 Filed 04/20/16 Desc Main Document Page 25 of 55 Debtor 1 Jennifer J. Kubek Case number (if know) 4.1 **Medical Recovery Specialists** 8854 \$1,097.76 Last 4 digits of account number 4 Nonpriority Creditor's Name c/o Edward Hospital & Health Svc When was the debt incurred? 2250 E. Devon Ave. Ste. 352 Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Debt 4.1 **Merchants Credit** 0782 \$536.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 8/01/15 When was the debt incurred? Ste 700 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other Specify Collection Attorney Edward Hospital ☐ Yes 4.1 Miramed Revenue Group 4423 \$145.00 Last 4 digits of account number 6 Nonpriority Creditor's Name When was the debt incurred? 991 Oak Creek Dr Lombard, IL 60148 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent

Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Med1 02 Women S Center For Health ☐ Yes

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Debtor 1 Jennifer J. Kubek Case number (if know) 4.1 Navient 0126 \$343.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 1/01/05 Last Active Po Box 9500 When was the debt incurred? 3/28/16 Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Educational 4.1 Synchrony Bank/Lowes 8831 \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcv Opened 5/01/14 Last Active Po Box 103104 When was the debt incurred? 6/02/14 Roswell, GA 30076 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.1 \$1.051.00 Tnb-Visa (TV) / Target 9255 Last 4 digits of account number Nonpriority Creditor's Name C/O Financial & Retail Services Opened 10/01/03 Last Active Mailstop BV PO Box 9475 When was the debt incurred? 3/18/16 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit Card

Page 27 of 55 Case number (if know) Document Debtor 1 Jennifer J. Kubek 4.2 United Collection Bureau, Inc. 8530 \$75.54 Last 4 digits of account number 0 Nonpriority Creditor's Name c/o Edward Hospital When was the debt incurred? 09-24-15 5620 Southwyck Blvd. Suite 206 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt** Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency

is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address **Edwards Hospital**

PO Box 4207

Carol Stream, IL 60197

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.14 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

8854

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				·	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	343.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	10,492.78
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	10,835.78

Fill in this infor	ill in this information to identify your case:							
Debtor 1	Jennifer J. Kubel	<						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

2.1 Landlord

State what the contract or lease is for Debtor is a tenant at 487 Silver Charm, Oswego, IL 60543

		Document	Page 29 of 55	
Fill in thi	is information to identify you	r case:		
Debtor 1	Jennifer J. Kube	k		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name	
			II I INOIS	
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case nur	mber			
(if known)				Check if this is an
				amended filing
Officia	al Form 106H			
	dule H: Your Cod	lahtare		42/45
SCITE	dule II. Toul Cot	ienioi 2		12/15
Deople ar ill it out, your nam 1. Do No Ye 2. Wi Arizo No Ye 3. In Co in lir Forn	re filing together, both are equand number the entries in the eard case number (if known to you have any codebtors? (life) es ithin the last 8 years, have you ona, California, Idaho, Louisiana on Go to line 3. es. Did your spouse, former spout your codebter 2 again as a codebtor only in 106D), Schedule E/F (Official Column 2.	ually responsible for supplying boxes on the left. Attach the high. Answer every question. If you are filing a joint case, do not lived in a community properation, Nevada, New Mexico, Puerto puse, or legal equivalent live with lives. Do not include your sport for that person is a guarantor.	ouse as a codebtor if your spouse is f or cosigner. Make sure you have liste G (Official Form 106G). Use Schedule	is needed, copy the Additional Page, top of any Additional Pages, write error of any Additional Pages, write error states and territories include in.) illing with you. List the person shown the creditor on Schedule D (Official D, Schedule E/F, or Schedule G to file
	Column 1: Your codebtor	710.0		creditor to whom you owe the debt
	Name, Number, Street, City, State and 2	ZIF COUR	Check all sched	dules that apply:
3.1	Theodore F. Kubek Jr.		■ Schedule D	D, line 2.1
	796 Apollo Lane Oswego, IL 60543			E/F, line
	Oswego, IL 00343		☐ Schedule 0	<u> </u>
			Us Bank	
2.2	Theodore F. Kubek Jr.			
3.2	796 Apollo Lane			D, line <u>2.2</u>
	Oswego, IL 60543			E/F, line
	3.,		☐ Schedule 0 US Bank	·
			US Bank	
3.3	Theodore F. Kubek, Jr.		☐ Schedule [D, line
	796 Apollo Lane			 E/F, line 4.14
	Oswego, IL 60543		☐ Schedule 0	
				overy Specialists
				- ·

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Fill	in this information to identify your ca	ase:						
	otor 1 Jennifer J. K				_			
	otor 2 ouse, if filing)				-			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_			
(If kr	fficial Form 106l					13 income	ed filing ent showing post as of the followir	tpetition chapter ng date:
_	chedule I: Your Inc	omo				MM / DD/ Y	YYY	12/15
sup spo atta Par	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	are married and not filing wi	ng jointly, and your spith you, do not include	oouse is e inform	living with	h you, inclu ut your spo	ude information ouse. If more sp	n about your pace is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing s	pouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed			☐ Employed		
	information about additional employers.	. ,	☐ Not employed			☐ Not e	mployed	
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name	Director KinderCare Educ	ation L	LC			
	Occupation may include student or homemaker, if it applies.	Employer's address	650 NE Holladay Portland, OR 972		te 1400			
		How long employed to	here? 19 years			_		
Pai	t 2: Give Details About Mor	nthly Income						
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to rep	oort for a	ny line, wri	te \$0 in the	space. Include	your non-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all en	nployers fo	r that perso	on on the lines be	elow. If you need
					For De	ebtor 1	For Debtor 2 non-filing sp	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,166.50	\$	N/A
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A

4,166.50

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Jennifer J. Kubek	=	Case	e number (if known)			
	0		4	Fo	r Debtor 1	For Debto	spouse	
	Сор	y line 4 here	4.	\$_	4,166.50	\$	N/A	
5.	List	all payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$ _	915.31 0.00	\$ 	N/A N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	208.33	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_ \$	0.00	\$	N/A	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$_	330.14 0.00	\$ \$	N/A N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify: Dental Ins.	5h.+	. –		+ \$	N/A	
		HFSA (Health Acct)	_	\$	16.66	\$	N/A	
		Short Term Disability	_	\$	30.01	\$	N/A	
		Vision		\$	10.25	\$	N/A	
		Term life Ins.		\$_	4.20	\$	N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,548.53	\$	N/A	
7.	Caic	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ __	2,617.97	\$	N/A	
8.	8a. 8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e.	\$	0.00 0.00 751.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A	
	011.		_ ''''	Ψ <u> </u>	0.00	· Ψ	11/7	7
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	751.00	\$	N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		3,368.97 + \$	N/A	A = \$	3,368.97
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					1 -	,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		.,	ed in <i>Schedi</i>	ıle J. . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resile that amount on the Summary of Schedules and Statistical Summary of Certain ies			,		. \$	3,368.97 ed
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?					income
	_	Yes. Explain:						

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Fill i	in this information to identify your case:				
Debt	tor 1 Jennifer J. Kubek		Chec	k if this is:	
Debt	tor 2			An amended filing	ving postpetition chapter
	ouse, if filing)				the following date:
Unite	ed States Bankruptcy Court for the: NORTHERN DISTRICT OF I	LLINOIS	1	MM / DD / YYYY	
Case	e numbef				
(If kn	nown)				
Of	ficial Form 106J				
Sc	chedule J: Your Expenses				12/1
Be a	as complete and accurate as possible. If two married peop ormation. If more space is needed, attach another sheet to nber (if known). Answer every question.				
Part 1.	Describe Your Household Is this a joint case?				
1.	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expe	enses for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		8	■ Yes
		_			□ No
		Son		11	Yes
					□ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include				□ res
0.	expenses of people other than yourself and your dependents?				
exp	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unleases as of a date after the bankruptcy is filed. If this is a licable date.				
the	ude expenses paid for with non-cash government assistated value of such assistance and have included it on Schedul iicial Form 106I.)			Your exp	enses
-					
4.	The rental or home ownership expenses for your resident payments and any rent for the ground or lot.	ice. Include first mortgag	e 4. \$		1,300.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		50.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5	Additional mortgage payments for your residence, such a	se nama aquity lagne	5 \$		0.00

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Deb	otor 1	Jennifer	J. Kubek	Case no	um	ber (if known)	_
6.	Utiliti	ies:					
	6a.		, heat, natural gas	6	a.	\$	175.00
	6b.	Water, se	wer, garbage collection	6	b.	\$	65.00
	6c.		e, cell phone, Internet, satellite, and cable service	s 6	ic.	\$	175.00
	6d.	Other. Sp	ecify:	6	d.	\$	0.00
7.	Food	and hous	ekeeping supplies		7.	\$	725.00
8.	Child	dcare and o	children's education costs		8.	\$	100.00
9.	Cloth	hing, laund	ry, and dry cleaning		9.	\$	125.00
10.	Perso	onal care p	products and services	1	0.	\$	100.00
11.	Medi	ical and de	ntal expenses	1	1.	\$	100.00
12.	Trans	sportation.	Include gas, maintenance, bus or train fare.				
	Do no	ot include c	ar payments.		2.	•	175.00
13.	Ente	rtainment,	clubs, recreation, newspapers, magazines, an		3.		50.00
14.	Char	itable cont	ributions and religious donations	1	4.	\$	0.00
15.		rance.					
			surance deducted from your pay or included in li		_	Φ.	
		Life insura		15			32.00
		Health ins		15			0.00
		Vehicle in			C.	·	37.50
4.0			Irance. Specify:		d.	\$	0.00
16.	Spec		clude taxes deducted from your pay or included i		6	œ	0.00
17		•	ease payments:	'	6.	Φ	0.00
17.			ease payments: ents for Vehicle 1	17	a	\$	0.00
			ents for Vehicle 2	17			0.00
		Other. Sp	ocify:	17	c.		0.00
		Other. Sp				·	0.00
1Ω			of alimony, maintenance, and support that yo		u.	Ψ	0.00
10.			your pay on line 5, Schedule I, Your Income (0		8.	\$	0.00
19.			s you make to support others who do not live			\$	0.00
	Spec	ify:		1	9.		
20.	Othe	r real prop	erty expenses not included in lines 4 or 5 of the	is form or on Schedule I:	Yo	our Income.	
	20a.	Mortgages	s on other property	20	a.	\$	0.00
	20b.	Real estat	e taxes	20	b.	\$	0.00
	20c.	Property,	homeowner's, or renter's insurance	20	c.	\$	0.00
	20d.	Maintenar	nce, repair, and upkeep expenses	20	d.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20	e.	\$	0.00
21.	Othe	r: Specify:	Extra Curricular Activities for minor ch	ildren 2	1.	+\$	150.00
22	Calci	ulate vour	monthly expenses				
			through 21.			\$	3,359.50
			2 (monthly expenses for Debtor 2), if any, from O	fficial Form 106.I-2		s —	3,333.30
			a and 22b. The result is your monthly expenses.	11000 2		\$	3,359.50
	226. /	Auu IIIIe 22	a and 22b. The result is your monthly expenses.			Ψ	3,359.50
23.	Calc	ulate your	monthly net income.				
	23a.	Copy line	12 (your combined monthly income) from Schedu	le I. 23	a.	\$	3,368.97
	23b.	Copy your	monthly expenses from line 22c above.	23	b.	-\$	3,359.50
	23c.		our monthly expenses from your monthly income			e e	9.47
		The result	is your monthly net income.	23	C.	\$	3.41
24.			an increase or decrease in your expenses with				
	modifi	ication to the	ou expect to finish paying for your car loan within the year terms of your mortgage?	r or do you expect your mortgaç	ge p	payment to inc	rease or decrease because of a
	■ No	0.					
	Пу	00	Explain here:	·			·

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Fill in this info	rmation to identify your	case:			
Debtor 1	Jennifer J. Kubek	(
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
, , , , ,					
United States B	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
	<u>rm 106Dec</u>				
Declara	tion About a	ın Individua	I Debtor's So	chedules	12/15
If two married p	people are filing together	r, both are equally resp	onsible for supplying co	rrect information.	
V		la li andronidan alle del		- Maldon - falso state	
You must file tr	nis form whenever you fi	le pankruptcy schedul	es or amended schedule nkruptov case can result	s. Making a taise state	ment, concealing property, or), or imprisonment for up to 20
	18 U.S.C. §§ 152, 1341, 1		inki upicy case can result	. III IIIIes up to \$250,000	o, or imprisonment for up to 20
Sig	gn Below				
Did you p	ay or agree to pay some	one who is NOT an att	orney to help you fill out	bankruptcy forms?	
■ No					
_					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
				Deciaration,	and Signature (Official Form 119)
	alty of perjury, I declare	that I have read the su	mmary and schedules fil	ed with this declaration	n and
that they a	are true and correct.				
X /s/ Je	nnifer J. Kubek		X		
Jenni	ifer J. Kubek		Signature of	of Debtor 2	
Signat	ure of Debtor 1				
Date	Amril 20, 2016		Date		
Date	April 20, 2016				

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Debtor 1 Jonniter J. Kubek Tex Name							
Debtor 2 First Name	Fill in	this inform	nation to identify you	ur case:			
Debtor 2 Case number	Debto	or 1			Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Case number	Debto	or 2	i iist ivaille	widdle Name	Lastinanie		
Case number Check if this is an amended filling Check if this is an amended filling Official Form 107 Statement of Financial Affairs for Individuals Filling for Bankruptcy 4/1: Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Partition Given Price Given Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married	(Spouse	e if, filing)	First Name	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married No	United	d States Bar	kruptcy Court for the	: NORTHERN DISTRICT C	OF ILLINOIS		
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number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before							
What is your current marital status?					uns form. On the top of any	y additional pages, write yo	ui ilaille allu case
What is your current marital status?	Part 1	Give D	etails About Your M	arital Status and Where You	Lived Before		
Married	1 1/4	lhat is your	ourront marital stat	ue?			
Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No	1. V	mat is your	Current mantai stat	us:			
2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address:							
No		Not mari	ried				
Pebtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Ived there	2. D	uring the la	st 3 years, have you	ı lived anywhere other than	where you live now?		
Debtor 1 Prior Address: Dates Debtor 1 Ilived there Debtor 2 Prior Address: Dates Debtor 2 Ilived there] No					
Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Debtor 1 Same as Debtor 2 Same as Debtor 2 Same as Debtor 2 Same as Debtor 2 Same as Debtor 1 Same as Debtor 2 Same as Debtor 1 Same as Deb		Yes. List	all of the places you	lived in the last 3 years. Do no	ot include where you live now	<i>1</i> .	
Oswego, IL 60543 Dec, 2005 to July, 2015 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips	I	Debtor 1 Pri	or Address:		Debtor 2 Prior Ad	dress:	
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips				Dec, 2005 to	☐ Same as Debtor	l	
states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips	_			July, 2013			
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□ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. □ No ■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) ■ Wages, commissions, bonuses, tips □ Wages, commissions, bonuses, tips	states	and territorie	es include Arizona, C	alifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and V	Visconsin.)
Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income (hefore deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips		No					
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) \$48,526.00 Wages, commissions, bonuses, tips		Yes. Ma	ke sure you fill out So	chedule H: Your Codebtors (Of	ficial Form 106H).		
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) \$48,526.00 Wages, commissions, bonuses, tips	Part 2	Explain	n the Sources of Yo	ur Income			
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips							
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Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. For last calendar year: (January 1 to December 31, 2015) Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$48,526.00 Wages, commissions, bonuses, tips	г	7 No					
Debtor 1 Sources of income Check all that apply. For last calendar year: (January 1 to December 31, 2015) Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) Wages, commissions, bonuses, tips		- 110	in the details.				
Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips			u.o dotalio.				
Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) Check all that apply. (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2015) Wages, commissions, bonuses, tips Under the deductions and exclusions and exclusions and exclusions)					Crass income		Crass income
(January 1 to December 31, 2015) wages, commissions, bonuses, tips bonuses, tips					(before deductions and		(before deductions
☐ Operating a business ☐ Operating a business					\$48,526.00	_	
				☐ Operating a business		☐ Operating a business	

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Case number (if known)

Document Debtor 1 Jennifer J. Kubek

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	Gross inco (before dec exclusions)	luctions and	Sources of inco		Gross income (before deductions and exclusions)
	the calend nuary 1 to			■ Wages, commissions, bonuses, tips		\$47,111.00	☐ Wages, common bonuses, tips	nissions,	
				☐ Operating a business			☐ Operating a b	usiness	
	the calend		31, 2013)	■ Wages, commissions, bonuses, tips		\$40,712.00	☐ Wages, common bonuses, tips	nissions,	
				☐ Operating a business			☐ Operating a b	usiness	
	and other winnings. I List each s No	public bene f you are fil	fit payments; ing a joint cas the gross inco	er that income is taxable. Exapensions; rental income; inter e and you have income that y	est; dividends ou received to	; money collec ogether, list it o	ted from lawsuits; ranks once under Del	oyalties; and otor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	Gross inco each source (before dec exclusions)	ce luctions and	Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
	m January date you f		nt year until nkruptcy:	Child Support		\$2,253.00			
	last calen nuary 1 to		31, 2015)	Child Support		\$751.00			
Dar	t 3: List	Cortain Pa	yments Vou	Made Before You Filed for I	Bankruntov				
ı aı	t J.	Certaiii i a	iyiileiits iou	made before Tod Fried for I	Bankiuptcy				
6.	Are either No.	Neither D	ebtor 1 nor D	s debts primarily consumer lebtor 2 has primarily consu personal, family, or househol	ımer debts. C	onsumer debts	s are defined in 11 l	J.S.C. § 101	1(8) as "incurred by ar
		•	90 days befo	re you filed for bankruptcy, di	d you pay any	creditor a total	of \$6,425* or more	∍?	
		□ _{No.}	Go to line 7						
		□ Yes	paid that cre not include	each creditor to whom you paid editor. Do not include payment payments to an attorney for the	its for domesti nis bankruptcy	c support oblig case.	ations, such as chi	ld support ar	nd alimony. Also, do
	_	^ Subject	to adjustment	on 4/01/19 and every 3 years	s after that for	cases filed on	or after the date of	adjustment.	
	■ Yes.			r both have primarily consu re you filed for bankruptcy, die		creditor a total	of \$600 or more?		
		■ No.	Go to line 7						
		□ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.					
	Creditor's	s Name an	d Address	Dates of payme	nt Tot	al amount	Amount you	Was this p	eayment for

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Debtor 1 Jennifer J. Kubek

Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	control, or owner of 20% o	eral partners; partner r more of their voting	erships of which y g securities; and	ou are a genera any managing a	al partner; corporations gent, including one for
Insider's Name and Address	Dates of payment	Total amount	Amount you still owe		this payment
Joyce Ryburm Debtor's mother	2016	\$2,000.00	\$0.00		lp with family
insider?		ments or transfer a	any property on	account of a d	ebt that benefited an
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name
rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
List all such matters, including personal injury modifications, and contract disputes.					
Yes. Fill in the details.					
Case title Case number	Nature of the case	Court or agency		Status of th	ne case
Jennifer J Kubek v. Theodore F. Kubek Jr. 2015 D 232	Dissolution of Marriage	Court 807 John Stree	et	☐ Pending ☐ On appe ☐ Conclud	eal
U.S. Bank National Association v. Jennifer J Kubek and Theordore F. Kubek, Jr. Et al. 15 CH 00316	Foreclosure	Court 807 John St.		■ Pending □ On appe □ Conclud	eal
					le complete but mation of sale
Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, f	oreclosed, garn	ished, attached	d, seized, or levied?
Creditor Name and Address	Describe the Property	ı	Date	е	Value of the property
U.S. Bank, N.A. c/o Codilis & Associates, P.C. 15W030 North Frontage Rd. Suite 100 Willowbrook, IL 60527	796 Apollo Lane Osw ☐ Property was reposse ☐ Property was foreclos ☐ Property was garnishe	vego, IL 60543 essed. eed. eed.	12/	15/2015 but	\$264,020.00
	of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes. List all payments to an insider. Insider's Name and Address Joyce Ryburm Debtor's mother Within 1 year before you filed for bankruptor insider? Include payments on debts guaranteed or costained insider's Name and Address No Yes. List all payments to an insider Insider's Name and Address 14: Identify Legal Actions, Repossession Within 1 year before you filed for bankruptor insider's Name and Address No Yes. Fill in the details. Case title Case number Jennifer J Kubek v. Theodore F. Kubek Jr. 2015 D 232 U.S. Bank National Association v. Jennifer J Kubek and Theordore F. Kubek, Jr. Et al. 15 CH 00316 Within 1 year before you filed for bankruptor Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address U.S. Bank, N.A. c/o Codilis & Associates, P.C. 15W030 North Frontage Rd. Suite	of which you are an officer, director, person in control, or owner of 20% of a business you operate as a sole proprietor. 11 U.S.C. § 101. Include paralimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment Debtor's mother Within 1 year before you filed for bankruptcy, did you make any pay insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address Dates of payment Italian and Address Dates of payment Table	of which you are an officer, director, person in control, or owner of 20% or more of their votin a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment Debtor's mother Dates of payment Dates of payment Total amount paid S2,000.00 Within 1 year before you filed for bankruptcy, did you make any payments or transfer a insider? Include payments on debts guaranteed or cosigned by an insider. No No Dates of payment Dates of payment Total amount paid Total amount paid S2,000.00 Within 1 year before you filed for bankruptcy, did you make any payments or transfer a insider's Name and Address Dates of payment Total amount paid Total amount paid Total amount paid S2,000.00 No	of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligational almony. No Yes, List all payments to an insider. Insider's Name and Address Dates of payment Total amount pour still owe you pertor on the paid still owe you pertor on the paid still owe you pertor insider? Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on insider? No No No No No No No No No N	No Yes. List all payments to an insider. Insider's Name and Address Dates of payment Total amount paid S2,000.00 S0.00 Mother he Debtor's mother 2016 \$2,000.00 \$0.00 Mother he Debtor's mother S2,000.00 S0.00 Mother he Debtor's mother S2,000.00 S0.00 Mother he Debtor's mother S2,000.00 S0.00 Mother he Expenses S2,000.00 Mother he Expenses S2,000.00 S0.00 Mother he Expenses S2,000.00 Mother he Expense S2,000.00 Mother he Expenses S2,00

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Case number (if known) Document Debtor 1 Jennifer J. Kubek

11.	Within 90 days before you filed for bankruptcy accounts or refuse to make a payment becaus ■ No □ Yes. Fill in the details.	, did any creditor, including a bank or financial ins e you owed a debt?	stitution, set off any a	mounts from your
		escribe the action the creditor took	Date action was taken	Amount
	court-appointed receiver, a custodian, or anot ■ No □ Yes	was any of your property in the possession of an a her official?		fit of creditors, a
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	han \$600 per person?	
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contribution	, did you give any gifts or contributions with a tota	Il value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling?	or since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	how the loss occurred Include	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			
	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepare	did you or anyone else acting on your behalf pay or ring a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	Person Who Was Paid	Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was	payment
	Metrou & Associates, P.C. 123 W. Washington St., Suite 216 Oswego, IL 60543 metrouassociates@sbcglobal.net	Total paid \$1,268.00 and disbursed as follows: \$900.00 for attorneys fees to Metrou & Associates, P.C.; \$335.00 for filing fees to Clerk of the Court; and \$33.00 for due diligence fee to Credit InfNet.	April, 2016	\$1,268.00

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Debtor 1 Jennifer J. Kubek

 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone w promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 			perty to anyone who		
	Person Who Was Paid Address	Description and variansferred	alue of any propert	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your burneline both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	ousiness or financial affa ade as security (such as	airs? the granting of a sec		
	Person Who Received Transfer Address	Description and v		Describe any property or payments received or debts paid in exchange	Date transfer was made
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-programs) No Yes. Fill in the details.		ny property to a self	-settled trust or similar devic	e of which you are a
	Name of trust	Description and v	alue of the propert	y transferred	Date Transfer was made
Pai	18: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Storag	ge Units	
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benef sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions.					
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account of instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for cash, or other valuables? No Yes. Fill in the details. 		ository for securities,			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?
22.	Have you stored property in a storage unit		r home within 1 yea	r before you filed for bankru	otcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?

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Debtor 1 Jennifer J. Kubek

Pa	Identify Property You Hold or Control for	Someone Else		
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	erty you borrowed from, are storing fo	r, or hold in trust
	□ No			
	Yes. Fill in the details.			
	<u> </u>	M/II !- (I	5 '1 '1	

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Minor son age 8 Debtor's residence	Chase Bank	Chase Bank acct ending xxxx3253	\$1,247.18
Minor Son age 11	Chase Bank	Chase Bank acct ending xxxx0086	\$1,910.19

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

- 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?
 - No

 Yes. Fill in the details.

 Name of site
 Address (Number, Street, City, State and ZIP Code)

 Governmental unit
 Address (Number, Street, City, State and ZIP Code)

 Brown Date of notice know it

 ZIP Code)
- 25. Have you notified any governmental unit of any release of hazardous material?
 - No
 □ Yes. Fill in the details.

 Name of site
 Address (Number, Street, City, State and ZIP Code)

 Governmental unit
 Address (Number, Street, City, State and ZIP Code)

 Benvironmental law, if you know it

 Environmental law, if you know it
- 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.
 - No

 ☐ Yes. Fill in the details.

 Case Title
 Case Number

 Case Number

 Case Number

 Name
 Address (Number, Street, City, State and ZIP Code)

 Noture of the case
 Case

 Status of the case
 Case

Part 11: Give Details About Your Business or Connections to Any Business

- 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

 A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 - ☐ A partner in a partnership

Case 16-13433 Doc 1 Filed 04/20/16 Entered 04/20/16 12:39:33 Page 41 of 55 Case number (if known) Document Debtor 1 Jennifer J. Kubek ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jennifer J. Kubek Jennifer J. Kubek Signature of Debtor 2 Signature of Debtor 1 Date April 20, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No
□ Yes

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jennifer J. Kubek			
200101 1	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	inkruptcy Court for the:		FRICT OF ILLINOIS	
Officed States Da	inkruptcy Court for the.	NORTHERN DIST	THE TOT ILLINOIS	
Case number _ (if known)				☐ Check if this is an amended filing
Official Fo Statemer		n for Indiv	riduals Filing Under Chapt	er 7 12/15
	ividual filing under cha e claims secured by yo	-	l out this form if:	
■ you have leas You must file thi	sed personal property a s form with the court w ever is earlier, unless th	nd the lease has neithin 30 days after	ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to th	
	eople are filing togethe	r in a joint case, bo	th are equally responsible for supplying correct i	nformation. Both debtors must
write y	and accurate as possib our name and case nur our Creditors Who Hav	mber (if known).	s needed, attach a separate sheet to this form. Or	the top of any additional pages,
1. For any credit	ors that you listed in Pa		: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information be Identify the cr	editor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's U	ls Bank		■ Surrender the property.	□ No
name:			Retain the property and redeem it.	
•	796 Apollo Lane O 60543 Kendall Co		☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:		ouse neriff sale but	☐ Retain the property and [explain]:	
Creditor's U	JS Bank		■ Surrender the property.	□ No
name:			☐ Retain the property and redeem it. ☐ Retain the property and enter into a	■ Yes
Description of property securing debt:	60543 Kendall Co Owned with ex-sp Theodore Kubek Property sold at sl	unty ouse neriff sale but	Reaffirmation Agreement. Retain the property and [explain]:	
	confirmation of sa pending	ie Still		

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Deb	otor 1 J	lennifer J. k	Kubek		Case number (if known)	
For in th	any unex ne inform	cpired personation below.	Do not list real estate	t you listed in Schedule G: Executory Co	ontracts and Unexpired Leases (Official Form 106G at are still in effect; the lease period has not yet end it. 11 U.S.C. § 365(p)(2).	
Des	scribe yo	ur unexpired	l personal property le	ases	Will the lease be assumed?	
Les	sor's nam	ne: L	andlord		□ No	
					■ Yes	
	scription o	of leased D	ebtor is a tenant at	487 Silver Charm, Oswego, IL 6054	3	
Par	t 3: Sig	gn Below				
	•		I declare that I have i o an unexpired lease.	, , ,	y of my estate that secures a debt and any persona	al
Χ	/s/ Jen	nifer J. Kul	bek	X		
	• • • • • • • • • • • • • • • • • • • •	er J. Kubek re of Debtor	='	Signature of	Debtor 2	
	Date	April 20,	2016	Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-13433 Doc 1 Filed 04/20/16 Entered 04/20/16 12:39:33 Desc Main Document Page 48 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Jennifer J. Kubek		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	BTOR(S)	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy,	or agreed to be paid t	to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have received		\$	900.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. Т	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed comp	pensation with any other person t	unless they are memb	pers and associates of 1	my law firm.
I	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrows.				w firm. A
6. l	n return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy ca	ase, including:	
b c	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how	ement of affairs and plan which ors and confirmation hearing, and reduce to market value; execute ons as needed; preparation	may be required; d any adjourned hear mption planning;	ings thereof;	ling of
7. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis			ngs.	
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	payment to me for re	presentation of the de	btor(s) in
Aı	oril 20, 2016	/s/ Peter N. Metrou	ı		
	ate	Peter N. Metrou 06			
		Signature of Attorney Metrou & Associa			
		123 W. Washingto	n St., Suite 216		
		Oswego, IL 60543			
		(630) 551-7171 Fa metrouassociates			

Name of law firm

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Metrou & Associates, P.C. Attorneys & Counselors at Law

Peter N. Metrou, Attorney Meghan N. Nemiroff, Associate Attorney Lynn Martner, Real Estate Paralegal 123 W. Washington Street Suite 216 Oswego, Illinois 60543 Telephone: (630) 551-7171 Facsimile: (630) 551-7174

JENDEFON J. KUBEK BANKRUPTCY RETAINER AGREEMENT

You are retaining Metrou & Associates, P.C., (herein referred to as Law Office) to prepare and file a petition for bankruptcy on your behalf and to represent you in this matter. You have reviewed this Bankruptcy Retainer Agreement prior to signing it and fully understand the contents herein.

- 1) The services that are included in this matter include, pre-filing advice, advice during the case concerning the nature and effect of the Bankruptcy Code; preparation and filing of the petition, representation at the meeting of creditors; submitting information pursuant to request from the trustee and other routine services not specifically stated. Additional fees may be charged for failure to appear at your creditors meeting, or other extra ordinary services. As case information is discovered and analyzed, the fee and advice may change. This fee agreement does not provide for representation in adversary proceedings (lawsuits within the bankruptcy); representation in any state court proceedings; or any other proceedings in any other forum.
- 2) You agree that you will fully disclose all of your assets, debts, and all financial information and understand that it is a federal crime to omit information from your bankruptcy petition.
- 3) If you decide to discontinue our services at any time, you will be entitled to a refund of unearned fees. In that event, you will be billed at an hourly rate of \$250.00 per hour and all cancellation or discontinuation of services must be expressed in writing. If your case is not filed, you authorize counsel to apply funds held in the Law Office's trust account toward payment of any outstanding attorney fees.
- 4) You agree that the signature(s) on this contract also grant a limited power of attorney to the Law Office to obtain any and all documents that are necessary for the filing of this case. This may include, but is not limited to, tax returns, tax transcripts, credit reports, verifications of debts, verifications of income, and contact with employers.
- 5) No bankruptcy will be filed without: full payment of fees and costs, complete disclosure of information, and your review and signature of your entire bankruptcy petition.

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- 6) You will be charged a non-refundable \$25.00 fee for returned checks.
- 7) You authorize Law Office to hire co-counsel or independent attorneys as needed, at the Law Office's expense, to work on this matter and divide fees with them on the basis of work. You authorized Law Office to have attorneys within the firm or outside counsel to review your file to explore other potential causes of actions you may have.
- 8) The entire contract between the parties is contained in this instrument, except as otherwise indicated. The parties agree to all of the terms and conditions set forth herein and acknowledge that they have read and understand this Agreement.

You further state and agree as follows:

I have been advised by my attorney(s) that I am required to complete a credit counseling course prior to filing my case.

I have been advised by my attorney(s) that I am required to complete the debt management course as required by the US Trustee's office after the filing of my case.

I have been advised by my attorney(s) that I am required to provide copies of the following documents: my filed tax return for the most recent year in which I was required to file a return; proof of all my income for the 60 days prior to the date my bankruptcy case is filed; a government issued photo ID; proof of my social security number.

I have been advised by my attorney(s) that I am not required to hire an attorney to file a bankruptcy and that I choose to do so voluntarily.

I have been advised by my attorney(s) that if my gross income is greater than the state median income, that I may be required to file for relief under Chapter 13 bankruptcy.

I have been advised by my attorney(s) that Law Office may be construed as a debt relief agency helping people file for bankruptcy relief under the U.S. Bankruptcy Code and that all cases are subject to an audit, whereby I may be required to provide additional information.

I have been advised by my attorney(s) that the Law Offices does not provide tax advice and that I should seek the advice of a tax specialist to determine the tax consequences of the bankruptcy filing to determine if I will be required to report the bankruptcy filing and pay taxes.

I have been advised by my attorney that if I own real estate of which is subject to association dues and assessments, and I intend to surrender the real estate as part of my bankruptcy, that I may be liable for the association dues incurred from the date of filing the bankruptcy to the confirmation date of a foreclosure proceeding against the real estate or other event removing me as record owner of the property.

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Attorneys Fees & Costs:	Chapter 7	Chapter 13
Attorneys Fee Due Diligence Fee Court Filing Fee	37.00 335.00	
Total Fees	12-68,00	
Today You paid us \$ 1268-07 Who before your case is filed	as your retainer fee. Y	You agree to pay your balance ed as follows:
Client Client	4-20-10 Date Client	Date
Metrou & Associates, P.C.	4/20/16 Date	

United States Bankruptcy Court Northern District of Illinois

In re	Jennifer J. Kubek		Case No.	
		Debtor(s)	Chapter 7	
	VERIFICATION OF CREDITOR MATRIX			
		Number of	Number of Creditors: 28	
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and correct to	the best of my
Date:	April 20, 2016	/s/ Jennifer J. Kubek Jennifer J. Kubek Signature of Debtor		

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Codilis & Assocs 15W030 North Frontage Rd, Ste 100 Willowbrook, IL 60527

Codilis & Assocs 15W030 North Frontage Rd, Ste 100 Willowbrook, IL 60527

Edward Health Ventures 26185 Network Place Chicago, IL 60673

Edward Health Ventures 26185 Network Place Chicago, IL 60673

Edward Health Ventures 26185 Network Place Chicago, IL 60673

Edward Health Ventures 26185 Network Place Chicago, IL 60673

Edward Hospital P.O. Box 140250 Toledo, OH 43614

Edwards Hospital PO Box 4207 Carol Stream, IL 60197

Edwards Hospital PO Box 4207 Carol Stream, IL 60197 Edwards Hospital PO Box 4207 Carol Stream, IL 60197

Edwards Hospital PO Box 4207 Carol Stream, IL 60197

Fifth Third Bank Attn: Bankruptcy 1850 East Paris Ave, Se Grand Rapds, MI 49546

Laboratory & Pathology Diagnostics Dept. 4387 Carol Stream, IL 60122

Laboratory & Pathology Diagnostics Dept. 4387 Carol Stream, IL 60122

Medical Recovery Specialists c/o Edward Hospital & Health Svc 2250 E. Devon Ave. Ste. 352 Des Plaines, IL 60018

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 103104 Roswell, GA 30076 Theodore F. Kubek Jr. 796 Apollo Lane Oswego, IL 60543

Theodore F. Kubek Jr. 796 Apollo Lane Oswego, IL 60543

Theodore F. Kubek, Jr. 796 Apollo Lane Oswego, IL 60543

Tnb-Visa (TV) / Target C/O Financial & Retail Services Mailstop BV PO Box 9475 Minneapolis, MN 55440

United Collection Bureau, Inc. c/o Edward Hospital 5620 Southwyck Blvd. Suite 206

Us Bank Attention: Bankruptcy Dept. Po Box 5229 Cincinnati, OH 45201

US Bank 4801 Frederica Street Owensboro, KY 42301